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TRANSMITTAL FORM

(To be used for all correspondence
after initial filing)

Application Number	09/575,249
Filing Date	May 19, 2000
First Named Inventor	Connie D. Myers
Group Art Unit	3622
Examiner Name	Jean D. Janvier
Attorney Docket No.	680047.404

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> CD(s), Number of CD(s) _____
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Request for Corrected Filing Receipt	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Amendment/Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Declaration	<input checked="" type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Information Disclosure Statement; Form PTO-1449	<input type="checkbox"/> Statement under 37 CFR 3.73(b)	<input type="checkbox"/> Additional Enclosure(s) (please identify below): _____ _____
<input type="checkbox"/> Cited References	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts under 37 C.F.R. 1.52 or 1.53		
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Individual Name	Ellen M. Bierman	Customer Number 00500
Signature	RECEIVED <i>Ellen M. Bierman</i>	
Date	SEP 08 2003 GROUP 3600	

CERTIFICATE OF MAILING		
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date specified below.		
Typed or printed name	Angela S. Long	
Signature	<i>Angela S. Long</i>	Date: August 27, 2003

**FEE TRANSMITTAL
for FY 2003**

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) **465**

<i>Complete if Known</i>	
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METHOD OF PAYMENT	
<input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other	
<input type="checkbox"/> Deposit Account: Deposit Account Number 19-1090 Deposit Account Name Seed Intellectual Property Law Group PLLC	
The Commissioner is authorized to (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any deficiencies	
to the above-identified deposit account.	

FEE CALCULATION					
1. BASIC FILING FEE					
Large Entity		Small Entity			
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	750	2001	375	Utility filing fee	<input type="text"/>
1002	330	2002	165	Design filing fee	<input type="text"/>
1003	520	2003	260	Plant filing fee	<input type="text"/>
1004	750	2004	375	Reissue filing fee	<input type="text"/>
1005	160	2005	80	Provisional filing fee	<input type="text"/>
				SUBTOTAL (1)	(\$)
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE					
Total Claims	74	-76** =	0	* <input type="text"/> = <input type="text"/>	
Independent Claims	4	-4** =	0	* <input type="text"/> = <input type="text"/>	
Multiple Dependent					
Large Entity					
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	
1202	18	2202	9	Claims in excess of 20	
1201	84	2201	42	Independent claims in excess of 3	
1203	280	2203	140	Multiple dependent claim, if not paid	
1204	84	2204	42	** Reissue independent claims over original patent	
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	
				SUBTOTAL (2)	(\$)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)					
3. ADDITIONAL FEES					
Large Entity		Small Entity			
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	<input type="text"/>
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	<input type="text"/>
1053	130	1053	130	Non-English specification	<input type="text"/>
1812	2520	1812	2520	For filing a request for ex parte reexamination	<input type="text"/>
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	<input type="text"/>
1805	1840*	1805	1840*	Requesting publication of SIR after Examiner action	<input type="text"/>
1251	110	2251	55	Extension for reply within first month	<input type="text"/>
1252	410	2252	205	Extension for reply within second month	<input type="text"/>
1253	930	2253	465	Extension for reply within third month	<input type="text"/>
1254	1450	2254	725	Extension for reply within fourth month	465
1255	1970	2255	985	Extension for reply within fifth month	<input type="text"/>
1401	320	2401	160	Notice of Appeal	<input type="text"/>
1402	320	2402	160	Filing a brief in support of an appeal	<input type="text"/>
1403	280	2403	140	Request for oral hearing	<input type="text"/>
1451	1510	1451	1510	Petition to institute a public use proceeding	<input type="text"/>
1452	110	2452	55	Petition to revive – unavoidable	<input type="text"/>
1453	1300	2453	650	Petition to revive – unintentional	<input type="text"/>
1501	1300	2501	650	Utility issue fee (or reissue)	<input type="text"/>
1502	470	2502	235	Design issue fee	<input type="text"/>
1503	630	2503	315	Plant issue fee	<input type="text"/>
1460	130	1460	130	Petitions to the Commissioner	<input type="text"/>
1807	50	1807	50	Processing fee for provisional applications	<input type="text"/>
1806	180	1806	180	Submission of Information Disclosure Stmt	<input type="text"/>
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	<input type="text"/>
1809	750	2809	375	Filing a submission after final rejection (37 CFR § 1.129(a))	<input type="text"/>
1810	750	2810	375	For each additional invention to be examined (37 CFR § 1.129(b))	<input type="text"/>
1801	750	2801	375	Request for Continued Examination (RCE)	<input type="text"/>
1802	900	1802	900	Request for expedited examination of a design application	<input type="text"/>
Other fee (specify) _____				<input type="text"/>	
*Reduced by Basic Filing Fee Paid				SUBTOTAL (3) (\$ 465)	

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SEP 08 2003
GROUP 3600

SUBMITTED BY				Customer Number
Name (Print/Type)	Ellen M. Bierman		Registration No. Attorney/Agent	
Firm Name/Address			38,079	
Signature	<i>Ellen M. Bierman</i>		Date	August 27, 2003